## Docket No. SYB/0100.00

| Please type a plus sign (+) inside this box | $\longrightarrow$ | + |
|---|-------------------|---|
|---|-------------------|---|

PTO/SB/81 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| Application Number     |             |  |
|------------------------|-------------|--|
| Filing Date            |             |  |
| First Named Inventor   | Bumbulis    |  |
| Group Art Unit         | Unassigned  |  |
| Examiner Name          | Unassigned  |  |
| Attorney Docket Number | SYB/0100.00 |  |

| I hereby appo  | int:                |                               |                            |         |                    |                 | 7                  |  |
|--|---------------------|-------------------------------|----------------------------|---------|--------------------|-----------------|--------------------|--|
| X Practitioners at Customer Number 31779 — Place Customer Number Bar Code Label here   |                     |                               |                            |         |                    |                 |                    |  |
| Name Registration Number   |                     |                               |                            |         |                    |                 |                    |  |
| John A. Smart  |                     | 34,                           | 34,929                     |         |                    |                 |                    |  |
|  |                     |                               |                            |         |                    |                 |                    |  |
|  |                     |                               |                            |         |                    |                 |                    |  |
|  |                     |                               |                            | 1       |                    |                 |                    |  |
| as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.                    |                     |                               |                            |         |                    |                 |                    |  |
| Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  |                     |                               |                            |         |                    |                 |                    |  |
| OR   |                     | <b>T-</b>                     |                            |         |                    |                 |                    |  |
| Firm <i>or</i><br>Individual Na  | ame                 | John A. Smart                 |                            |         |                    |                 |                    |  |
| Address  |                     |                               |                            |         |                    |                 |                    |  |
| Address  |                     | 708 Blossom Hill              | Rd. #201                   |         | ,                  |                 |                    |  |
| City   |                     | Los Gatos                     |                            | State   | CA                 | Zip             | 95032-3503         |  |
| Country  |                     | U.S.A.                        |                            |         | <u> </u>           |                 |                    |  |
| Telephone  |                     | 408 884 1507                  |                            | Fax     | Fax 408 490 2853   |                 |                    |  |
| l am the:  ☑ Applicant/Inventor.   |                     |                               |                            |         |                    |                 |                    |  |
| Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                     |                               |                            |         |                    |                 |                    |  |
|  |                     | SIGNATURE of A                | Applicant or Assign        | ee of   | Record             |                 |                    |  |
| Name   | Peter               | Bumbulis                      |                            |         |                    |                 |                    |  |
| Signature  | Tel                 | t hul                         |                            |         |                    |                 |                    |  |
| Date   | Date April 26, 2004 |                               |                            |         |                    |                 |                    |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |                     |                               |                            |         |                    |                 |                    |  |
| ☑ *Total of 1 forms are submitted.   |                     |                               |                            |         |                    |                 |                    |  |
| Burden Hour Statement: This  | form is act         | impted to take 2 minutes to a | romoloto. Timo vill venu d | onendin | - unan tha naada i | of the individu | iel sass. Any samm |  |

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.